

In re Application of: Christian A. Hille et al.
For: Active Rollover Protection Utilizing Steering Angle Rate Map
Attorney Docket No: 10543-072
Express Mail[®] mailing label number: EV 340864073 US
Date of Deposit: April 2, 2004

BRINKS
HOFFER
GILSON
& LIONE

U.S. PTO
10/817243

UTILITY PATENT APPLICATION TRANSMITTAL

Mail Stop PATENT APPLICATION
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Transmitted herewith is a new application under 37 C.F.R. §1.53(b), including the following elements and other papers:

1. Application including:
 - ☐ Application Data Sheet. See 37 CFR § 1.76.
 - ☒ Title page
 - ☒ Specification, including claims and Abstract (15 pages)
 - ☒ Drawings (2 sheet(s))
 - ☐ Appendices:
 - ☐ Declaration (_____ pages; ☐ Executed ☐ Unexecuted)
 - ☒ Combined Declaration and Power of Attorney (3 pages; ☒ Executed ☐ Unexecuted)
2. ☒ Information Disclosure Statement, including Form PTO-1449 (5 sheets), and any required copies
3. ☒ Assignment Recordation Cover Sheet, with fee and attached assignment to: Continental Teves, Inc.
4. ☐ Power of Attorney (_____ pages; ☐ by inventor ☐ by Assignee identified in item #3 above)
5. ☐ Nonpublication Request under 35 USC §122(b)(2)(B)(i)
6. ☐ Other: _____
7. ☒ Return Postcard
8. Fee calculation:

☐ Applicant is a Small Entity.

Claims as Filed	Col. 1	Col. 2	Small Entity			Not a Small Entity	
For	No. Filed	No. Extra	Rate	Fee	or	Rate	Fee
Basic Fee				\$ 385	or		\$ 770
Total Claims	20-20	0	x\$9=	\$	or	x\$18=	\$
Independent Claims	3-3	0	x\$43=	\$	or	x\$86=	\$
Multiple Dependent Claims Present			+\$145=	\$	or	+\$290=	\$
*If the difference in col. 1 is less than zero, enter "0" in col. 2.			Total	\$	or	Total	\$770

9. Fee payment:

- ☒ A check in the amount of \$770.00 to cover the filing fee is enclosed.
- ☒ A check in the amount of \$40.00 to cover the Assignment recordation fee is enclosed.
- ☐ Please charge my Deposit Account No. 23-1925 in the amount of \$_____. A copy of this Transmittal is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication, or credit any overpayment, to Deposit Account No. 23-1925:
 - ☒ Any additional filing fees required under 37 CFR § 1.16.
 - ☒ Any patent application processing fees under 37 CFR § 1.17.

10. CORRESPONDENCE ADDRESS: please recognize the correspondence address for this application as the address associated with the following Customer Number:

Customer No. 40878

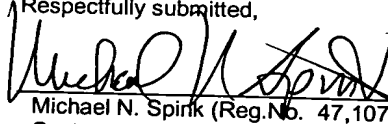
11. PLEASE DIRECT all telephonic and facsimile communications to:

Michael N. Spink (tel: (734) 302-6000; fax: (734) 994-6331).

Date

4/2/04

Respectfully submitted,



Michael N. Spink (Reg. No. 47,107)
Customer No. 00757 - Brinks Hofer Gilson Lione